

2100

(staple inside file in blue slip area)

USPTO

INTERNAL TRANSFER REQUEST FOR S.N.

09/1728,159

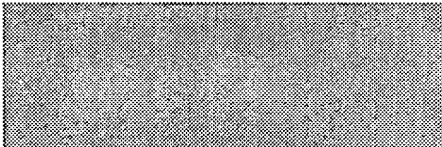
|   |   |
|---|---|
| DATE: <u>8-14-01</u>  | FROM: <u>EXAMINER COURTENAY</u> (print name) <u>AU 2151</u>   |
| FORWARD TO:<br>A. Art Unit: <u>2662</u><br>B. Class: <u>370</u><br>C Subclass: <u>913</u> | REASON(S):<br>A. You had Parent <input type="checkbox"/> (check box)<br>B. See Title <input type="checkbox"/> (check box)<br>C. See Abstract <input type="checkbox"/> (check box)<br>D. <u>See Claim(s):</u> <u>1 + 2</u> |

FURTHER EXPLANATION IF NEEDED:

Control of device via web enabled phone

|   |   |
|---|---|
| DATE: _____   | FROM: _____ (print name)  |
| FORWARD TO:<br>A. Art Unit: _____<br>B. Class: _____<br>C Subclass: _____ | REASON(S):<br>A. You had Parent <input type="checkbox"/> (check box)<br>B. See Title <input type="checkbox"/> (check box)<br>C. See Abstract <input type="checkbox"/> (check box)<br>D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED:

|  |   |
|--|---|
| DATE: _____  | FROM: _____ (print name)  |
| FORWARD TO CLASSIFIER<br> | REASON(S):<br>A. You had Parent <input type="checkbox"/> (check box)<br>B. See Title <input type="checkbox"/> (check box)<br>C. See Abstract <input type="checkbox"/> (check box)<br>D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED:

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DISPOSITION BY ~~2100~~ CLASSIFICATION

|   |   |
|---|---|
| DATE: _____   | CLASSIFIER: _____   |
| FORWARD TO:<br>A. Art Unit: _____<br>B. Class: _____<br>C Subclass: _____ | REASON(S):<br>A. You had Parent <input type="checkbox"/> (check box)<br>B. See Title <input type="checkbox"/> (check box)<br>C. See Abstract <input type="checkbox"/> (check box)<br>D. See Claim(s): _____ |

FURTHER EXPLANATION IF NEEDED: